

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT
FOR THE ~~MIDDLE~~ DISTRICT OF PENNSYLVANIA
EASTERN(1) DERRICK GIBSON # JP 2190
(Name of Plaintiff) (Inmate Number)SCI- PINE GROVE 189 PYLOCK RD, INDO, PA 15701
(Address)(2) _____
(Name of Plaintiff) (Inmate Number)

(Case Number)

(Address)

(Each named party must be numbered,
and all names must be printed or typed)

vs.

CIVIL COMPLAINT

(1) JOHNSON AND JOHNSON PT, AJ(2) M. BISER-SIPPLE, Dept. Supr.(3) BRITTANY HUNTER, C.H.C.A

(Names of Defendants)

(Each named party must be numbered,
and all names must be printed or typed)TO BE FILED UNDER: 42 U.S.C. § 1983 - STATE OFFICIALS 28 U.S.C. § 1331 - FEDERAL OFFICIALS

I. PREVIOUS LAWSUITS

A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

2:10-cv-0384 DERRICK GIBSON v. TROY LEWIS PT, AJ / Honorable Judge J.Curtis Joyner2:10-cv-0382 DERRICK GIBSON v. MARY FLEMMING PT, AJ / Honorable Judge
FPSCynthia Reed Eddy

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? Yes _____ No _____
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? Yes _____ No _____
- C. If your answer to "B" is Yes:
1. What steps did you take? INITIAL, SECOND LEVEL AND FINAL APPEALS

- 2. What was the result? NO AVAIL AND FRUITLE

- D. If your answer to "B" is No, explain why not: _____

III. DEFENDANTS: ~~ARE ALL BEING SUED IN THEIR OFFICIAL AND INDIVIDUAL CAPACITY~~

(1) Name of first defendant: JOHNSON AND JOHNSON

Employed as PHARMACEUTICAL CO. at JOHNSON AND JOHNSON
Mailing address: ONE JOHNSON AND JOHNSON PLAZA, NEW BRUNSWICK, N.J. 08933

(2) Name of second defendant: M. BISER-SIPPLE

Employed as DEPUTY SUPERINTENDENT at SCI - PHOENIX

Mailing address: 1200 MCKEEHIE DRIVE, COLLEGEMVILLE, PA. 19426

(3) Name of third defendant: BRITTANY HUNTER

Employed as DIRECTOR HEALTH CARE ADMIN. at SCI - PHOENIX

Mailing address: 1200 MCKEEHIE DRIVE, COLLEGEMVILLE, PA. 19426

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

IV. STATEMENT OF CLAIM

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. ON OR AROUND MAY 2021 THE PLAINTIFF WAS ADMINISTERED THE JOHNSON AND JOHNSON (JPHNSN) ONE SHOT COVID-19 VACCINATION WITHOUT WARNING OF
BLOODCLOTS AND PERMANENT DEATH SIDE EFFECTS, AND SHORTLY AFTERWARDS DEVELOPED SYMPTOMS
OF LEG, ARMS AND STOMACH CRAMPS,IGHT-HEADEDNESS, HEADACHES, TIREDNESS LOSS OF APPETITE
AND BLOODCLOT ON HIS LEFT ELBOW, DIFFICULT BREATHING, LEG SWELLING AND PAIN

III DEFENDANTS ^{Case 2}

H. DR. LATIZIO, physician / Medical Director

Employed as Medical Director at SCI - PHOENIX

MAILED ADDRESS: SCI-Phoenix 1200 Mokylehr Dr., Collegeville, PA. 19426

IV. STATEMENT OF CLAIM

I notified Dept. Sipple, MS. B. HUNTER AND DR. LATIZIO thru sick call slips, grievance and hunger strikes. However, ALL of the DEFENDANTS refused to acknowledge my symptoms or send me to AN outside hospital for treatment under the COVID-19 PA. DOC protocol. The DEFENDANTS ALSO refused to acknowledge these symptoms and obvious blood clot. DR. LATIZIO ordered AN X-RAY of my left elbow AND Although NO cystic fibroids or matter existed INTENTIONALLY mislabelled this blood clot AS A cyst. DR. LATIZIO then performed two SURGICAL procedures cutting open my left elbow to remove A cyst that did NOT exist that caused blood to leak out instead both procedures. I WAS AGAIN referred outside hospital treatment which would have treated AND elevated this blood clot AND symptoms immediately.

2. After Johnson + Johnson, the P.A. DOB AND STI-Phoenix discontinued the administration of the J&J (JENNA) covid-19 VACCINATION due to these same stated injuries the Plaintiff suffered for months from and also due to deaths. An outside physician brought into STI-Phoenix temporarily then diagnosed my abscess on my left elbow as a blood clot then ordered the appropriate steroid treatment. The Defendants then took months to administer the adequate medical treatment needed and prescribed allowing the Plaintiff to continue to suffer as a result physically, psychologically & emotionally.

3. The Defendants Dept Sipple and M.S. Hunter in retaliation for his medical complaints and peaceful protest illegally charged and over charged the Plaintiff for medical fees and treatment from May of 2021 to August 2022 AGAINST PA. POL policy and the law.

4. The conduct of Johnson and Johnson knowing prior to their side effects, symptoms and potential for death or serious illness but still manufactured, distributed and administered the (JENNSAN) round-19 VACCINATION and conduct of ALL of the Defendants placed the Plaintiff at serious risk and was a failure to protect, causing the PLAINTIFF to suffer maliciously for months from said physical symptoms and mental onset of serious depression, loss of focus, concentration and sleep, frequent loss of appetite weight, disorientation and stability. The Defendants ACTIONS and conduct CREATED A deliberate indifference to PATIENTS DR-ADM policy and of the PLAINTIFFS Rights under the UNITED STATES CONSTITUTION 1st Amendment of ACCESS to Redress, 8th Amendment AGAINST CRUEL AND UNUSUAL punishment and Adequate medical care, 14th Amendment of Due Process and Equal Protection, STATE LAW AGAINST NEGLIGENCE, MEDICAL MAL PRACTICE, INTENTIONAL INFILTRATION OF EMOTIONAL PAIN, BREACH of Protection, the PATIENT Bill of Rights and section 504 of the PATIENT ~~Rehabilitation Act~~, causing unnecessary, intentional and prolonged pain, suffering and injury

5. The Plaintiff has no plain, adequate or complete remedy at law to redress the wrongs described herein. Plaintiff has been and will continue to be irreparably injured by the conduct of the Defendants unless this court grants the declaratory and injunctive relief which plaintiff seeks.

2. _____

3. _____

V. RELIEF

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. I ask for six million dollars in financial and punitive damages from Johnson and Johnson. One million dollars in financial compensation and punitive damages for any and all past, present and future physical, psychological and emotional pain, suffering and injury from each defendant. Plaintiff

2. Defendants pay the cost of this civil action and attorney fees and a sum total of nine million dollars

3. I DEMAND A JURY TRIAL

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 25 day of October, 2022.

Denise Gibson
(Signature of Plaintiff)

DERRICK GIBSON # JP 2190
SCI - PINE GROVE
189 FLOCK ROAD
INDIANA, PA. 15701

PA DEPT
OF CORRECTIONS
INMATE MAIL

NEOPOST
10/27/2022
US POSTAGE \$002.64⁰

FIRST-CLASS MAIL



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UNITED STATES DISTRICT COURT OF
THE EASTERN DISTRICT OF PA.
601 MARKET STREET
PHILADELPHIA, PA. 19106

U.S.M.S.
X-RAY

